MAR 2 3 2006 D

DEAN HELLER SECRETARY OF STATE

				1 30
NAME Richard R. Glover MAILING ADDRESS PO BX 1844 CITY, STATE, ZIP Day to N. NV 89403	LENGTH OF RESIDEN	NCE IN DISTRICT	WHERE REGI	ISTERED TO
TELEPHONE 246 - 7309	VOTE [per NRS 281.571(* E-MAIL	1)(a)]	YS_	
List all public offices for which this financial disclosure stateme	ent is required INRS 2	81.571, Subsection	1(a)l:	
Public Office Elected (E) or Annu.	al Term or	ANNUAL all elected and appointed public officers (no later than Jan. 15 each year) NRS 281.559(1)(b)	CANDIDATE (no later than the 10th day after the last day to qualify as a candidate) NRS 281.561(1)(a)	APPOINTMENT to fill unexpired term of an elected or appointed public officer (within 30 days) NRS 281.559(1)(a)
Appointed (A) Compens	ation Date Appointed	281.561(1)(b)		Σοιισσο(1),αι)
Adminstrator s				
\$				
		L		
List all general sources of income for you and members of you	r household over 18	years of age [NF	RS 281.571, Su	
1.2				Self Household Member
Wages, Niotan, Inc				
Self Employed				
Kental Property				
	THE STATE OF THE S			
	····			
List each creditor to whom you or a member of your household or deed of trust on real property which is not required to be list rehicle for personal use was retained by seller] [NRS 281.571, Su	ed below, and (2) de	re [except (1) d bt for which a s	ebt secured ecurity intere	by mortgage est in a motor
			;	Self Household
Credit Card				Member:
Credit Card Credit Card				
		1.111	L	

NEVADA FINANCIAL DISCLOSURE STATEMENT (Attach additional sheets if necessary.)

involved as a trustee, beneficiary of a tr a class of stock or security representing			
[NRS 281.571, Subsection 1(f)]:	, , , , , , , , , , , , , , , , , , , ,		Household
ProBala A Roy	-V		Seit Member
ProBalanced Book RSG ENTERpris	* Refing	.,.,.	
17.00 CW (EXPVIS	es Fri		
15.		**************************************	
List specific location and particular use your household has a legal or beneficia			
state or an adjacent state [NRS 281.571, S	Subsection 1(c)]:	Particul	
Specific Loca 45 Heppwer Drive	Carson City	Revial	ıı USE
List the identity of donor and value of e			
during the preceding taxable year [exce consanguinity or affinity; and (2) cerem			
occasion if the donor does not have a s	•	J	-
[NRS 281.571, Subsection 1(e)]:	Donor		Value of Gift
			- \$ <u> </u>
			\$
			_ \$
			:
THE INFORMATION I HAVE PROVIDE	ED HEREIN IS ACCURATE A	ND COMPLETE.	!
			LCPA
Date: 3 - 21 - 06	Signature:	ed She	LCIPU

List each business entity (i.e., organization or enterprise operated for economic gain, including a proprietorship, partnership, firm, business, trust joint venture, syndicate, corporation or association) with which you or a member of your household is